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In re: Leo Chiu
Case: P8108 Application No.: 10/613,857 Filing date: 07/02/2003
Art Unit: 2645 Examiner: Gerald Gauthier
Subject: Behavioral Adaptation Engine for Discerning Behavioral Characteristics of Callers
Interacting with an VXML-Compliant Voice Application

Certificate of Transmission under 37 CFR 1.8

Attention: Gerald Gauthier, Examiner

Fax No.: (571) 273-8300

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Signature

Sheri Beasley

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2. Duplicate Amendment Transmittal - 1 sheet
3. Response A - 7 sheets
4. Cover Letter for Information Disclosure Statement - 1 sheet
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Method of Transmission: Facsimile

CASE DOCKET NO. P8108

In reference to application of Leo Chiu

Serial No. 10/613,857

For Behavioral Adaptation Engine for Discerning Behavioral Characteristics of Callers Interacting with an VXML-Compliant Voice Application

Sir:

Transmitted herewith is and an amendment in the above-identified application, under 37 C.F.R. 1.312.

- ☒ No additional fee is required.
☒ Applicant claims Small entity status under 37 CFR 1.27.
☐ The fee has been calculated as shown below.

**** CLAIMS AS AMENDED ****							
(1)	(2) Claims Remaining After Amendment	(3)	(4) Highest No. Paid For Previously	(5) Present Extra	(6) Rate Small Entity	(7) Rate Large Entity	(8) Additional Fee
Total Claims	30	Minus	** 36	0	\$ 25	\$ 50	\$ 0.00
Indep Claims	3	Minus	*** 3	0	\$ 100	\$ 200	\$ 0.00
<input type="checkbox"/> First presentation of a multiple dependent claim					\$ 0	\$ 0	\$ 0.00
<input type="checkbox"/> Terminal Disclaimer Fees					\$ 0.00		
Extension Fee	<input type="checkbox"/> 1st Month		<input type="checkbox"/> 2nd Month		<input type="checkbox"/> 3rd Month		\$ 0.00
Total additional for claims, time extensions and disclaimer fees							\$ 0.00

** If the "highest Number Previously Paid For" in this space is less than 20, write "20" in this space.

*** If the "highest Number Previously Paid For" in this space is less than 3, write "3" in this space.

**** Multiple dependencies, if any, included in the above calculation.

* If the entry in column 2 is less than the entry in column 4, write "0" in column 5.

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☐ Charge \$ 0.00 to deposit account 50-0534. (A duplicate of this sheet is enclosed)

☒ Please charge any additional fees or credit overpayment to Deposit Account 50-0534. A duplicate of this sheet is enclosed.

Respectfully Submitted, /Donald R. Boys/

Donald R. Boys
 Reg. No. 35074

Central Coast Patent Agency, Inc.
 P.O. Box 187
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Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

Response A